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DA.	UTILITY PATENT APPLICATION TRANSMITTAL		First inventor		Alex Williams			
PA			Title		Ribbed Towel with Handles			
	(Only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No.		ER115908483US			
	APPLICATION ELEMEN	rs	ADDRES		Mail Stop Patent Commissioner for P.O. Box 1450 Alexandria VA 2	r Patents	\$38 \$38	
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The incorporation	The incorporation can dilly be relied upon 19. CORRESPONDENCE ADDRESS							
Custon	ner Number:	023545		OR	Correspo	endence addi	ress below	
Name Kathleen M. Harleston								
Address	The Harleston Law Fir 909 Tall Pine Road	m LLC			week were the second se	Zip Code	20464	
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33,398



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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

X | Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	375.00

Complete if Known			
Application Number	Attached		
Filing Date			
First Named Inventor	Alex Williams		
Examiner Name			
Art Unit			
Attorney Docket No.	9720		

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
X Check Credit card Money Other None		3. ADDITIONAL FEES				
Order U			Small			
Deposit Account: Deposit	Fee Code			Fee (\$)	Fee Description	Fee Paid
Account	1051	130	2051		Surcharge - late filing fee or oath	
Number Deposit	1052	50	2052		Surcharge - tote provisional filing fee or	
Account Name			1053		cover sheet Non-English specification	
The Director is authorized to: (chack all that apply)	1053 1812	130 2.520	1812 2		For filing a request for ex parta reaxamination	
Charge fee(s) indicated below Credit any overpayments		920*	1804		Requesting publication of SIR prior to	
Charge any additional fee(s) during the pendency of this application	1804	52.0	_		Examiner action	
Charge (se(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	1251	110	2251	55	Extension for reply within first month	
FEE CALCULATION	1252	410	2252	205	Extension for raply within second month	
1, BASIC FILING FEE Large Entity Small Entity	1253	930	2253	465	Extension for reply within third month	
Fee Fee Fee Fee Description Fee Paid	1254	1,450	2254	725	Extension for reply within fourth month	<u> </u>
Code (5) Code (5) 1001 750 2001 375 Utility filing fee 275 00	1255	1.970	2255	985	Extension for reply within fifth month	
1001 750 2001 575 Other thing fee 375.00	1401	320	2401	160	Notice of Appeal	
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filling a brief in support of an appeal	
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for orzi heaning	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 375.00	1452	110	2452	55	Petition to revive - unavoidable	
		1,300	2453	650	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2501	650	Utility issue fee (or reissue)	
Extra Claims below Fee Paid	1502	470	2502	235	Design issue fee	
Total Claims20** = X =	1503	630	2503		Plant issue fee	
Claims — " " — — " — — — — — — — — — — — — —	1460	130	1460		Pelitions to the Commissioner	
Multiple Dependent =	1807	50	1807		Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fog Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	750	2809	375	Filing a submission after final rejection	
1201 84 2201 42 Independent claims in excess of 3	g				(37 CFR 1.129(a))	-
1203 280 2203 140 Mulliple dependent claim, if not paid	1810	750	2610	375	For each additional invention to be examined (37 CFR 1,129(b))	
1204 84 2204 42 "Reissue independent claims over original patent	1801	750	2801	375		
1205 18 2205 9 Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (S) 0	Other	iee (sp	oecify) _			L
SUBTOTAL (2) (\$) U "or number previously paid, if groater: For Reissues, see above	'Red	uced by	Basic	Filing F	Fee Paid SUBTOTAL (3) (\$) 0	
or nominal previously paid, it gradies, i or norsales, and above						

SUBMITTED BY Registration No. 843-971-9453 33,398 Telephone Kathleen M. Harleston Nome (Print/Type) (Altomev/Agent) Katuloon Signature

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